

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	10666430	FILING DATE	
							APPLICANT(S)			
CLAIMS										
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT						
	IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP
1							51			
2							52			
3							53			
4							54			
5							55			
6							56			
7							57			
8							58			
9							59			
10							60			
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13							63			
14							64			
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37							87			
38							88			
39							89			
40							90			
41							91			
42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.	2						TOTAL IND.			
TOTAL DEP.	22						TOTAL DEP.			
TOTAL CLAIMS	24						TOTAL CLAIMS			